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#### **OFFICIAL LOCAL FORM 3**

## UNITED STATES BANKRUPTCY COURT DISTRICT OF MASSACHUSETTS

#### **CHAPTER 13 PLAN COVER SHEET**

Filing Date:	2/05/14	Docket #:	14-10455-jnf
Debtor:	Santo T Freni	Co-Debtor:	
SS#:	xxx-xx-6386	SS#:	
	64 Uptack Road		
Address:	Groveland, MA	Address:	
Debtor's Counsel:	Richard D. Smeloff 567869ATY		
Address:	45 Willard Street, Suite 200 Quincy, MA 02169		
Telephone #:	617-773-1900		
Facsimile #:	617-773-1966		

ATTACHED TO THIS COVER SHEET IS THE CHAPTER 13 PLAN FILED BY THE DEBTOR(S) IN THIS CASE. THIS PLAN SETS OUT THE PROPOSED TREATMENT OF THE CLAIMS OF CREDITORS. THE CLAIMS ARE SET FORTH IN THE BANKRUPTCY SCHEDULES FILED BY DEBTOR(S) WITH THE BANKRUPTCY COURT.

YOU WILL RECEIVE A SEPARATE NOTICE FROM THE BANKRUPTCY COURT OF THE SCHEDULED CREDITORS' MEETING PURSUANT TO 11 U.S.C. § 341. THAT NOTICE WILL ALSO ESTABLISH THE BAR DATE FOR FILING PROOFS OF CLAIMS.

PURSUANT TO THE MASSACHUSETTS LOCAL BANKRUPTCY RULES, YOU HAVE UNTIL THIRTY (30) DAYS AFTER THE § 341 MEETING OR THIRTY (30) DAYS AFTER THE SERVICE OF AN AMENDED OR MODIFIED PLAN TO FILE AN OBJECTION TO CONFIRMATION OF THE CHAPTER 13 PLAN, WHICH OBJECTION MUST BE SERVED ON THE DEBTOR, DEBTOR'S COUNSEL AND THE CHAPTER 13 TRUSTEE.

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### **OFFICIAL LOCAL FORM 3**

## UNITED STATES BANKRUPTCY COURT DISTRICT OF MASSACHUSETTS

#### PRE-CONFIRMATION CHAPTER 13 PLAN

#### AMENDED CHAPTER 13 PLAN

Docket No.	: <u>14-1</u>	0455-jnf		
DEBTOR(S):	(H)	Santo T Freni	SS#	
	(W)		SS#	
I. PLAN PAYM	IENT A	AND TERM:		
Debtor's shall	l pay m	onthly to the Trustee the sum of \$	for the term of:	
36 Months	s. 11 U	J.S.C. § 1325(b)(4)(A)(i);		
60 Months	s. 11 U	J.S.C. § 1325(b)(4)(A)(ii);		
⊠ 60 Months	s. 11 U	J.S.C. § 1322(d)(2). Debtor avers the following	owing cause:	
Feasibility				;or
II. SECURED (				
_	oaiu uii	ough the plan (including arrears):		
Creditor		Description of Claim (pre- purchase money, etc.)	petition arrears,	Amount of Claim
-Nationstar Mor	tgage-	pre-petition arrears	<b>\$</b>	9,450.09
	aid dir	d claims to be paid through the Plan \$ ectly by debtor to creditors (Not through I	9,450.09 Plan): Description of Claim	
C. Modification of	of Secu	red Claims:		
Creditor		Details of Modification (Additional Details May Be Attached)	on	Amt. of Claim to Be Paid Through Plan
-INCINE-				

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Amount of Claim 16,819.61  Amount of Claim 14,674.00 2,436.00
16,819.61 Amount of Claim 14,674.00
Amount of Claim  14,674.00
14,674.00
14,674.00
•
2,436.00
30,529.96
29,985.61
\$ <u> </u>
Amount of Claim
ntion of the Plan paymen
93,003.29
Amount of Claim
Amount of Claim <b>157,191.00</b>
_

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	(Example: Total of \$38,500.00 Separately classified unsecu	x .22 dividend = \$8,470.00) red claims (co-borrower, etc.):	
<b>.</b> .	Creditor -NONE-	Description of claim	\$ Amount of claim
	Total amount of separa	ately classified claims payable at%	\$ 0.00

#### VI. OTHER PROVISIONS

- A. Liquidation of assets to be used to fund plan:
- B. Miscellaneous provisions:

\*\*\*\*Nationstar Mortgage is wholly unsecured and shall be paid in accordance with the unsecured claims in the plan.

The Debtor's residence located at 64 Uptack Road, Groveland, MA has a present value of 592,000. The Debtor's residence is subject to a first mortgage to Nationstar Mortgage. The balance due to Nationstar Mortgage as of the date of the filing of the petition for relief was \$600,285.00.

The amount due Nationstar Mortgage at the time of filing petition for relief was \$157,191.00 and is included in Section V of this plan.

Pursuant to 11 USC 1322 (b)(2) this plan provides to modify the claim due Nationstar Mortgage and treat such claim as an unsecured claim in its entirety.

The Order of Discharge to be entered in this case under 11 USC 1328(a) shall constitute a discharge of the mortgage of the mortgage held by Specialized Loan Servicing and described hereinabove.

#### VII. CALCULATION OF PLAN PAYMENT

A) Secured claims (Section I-A Total):	\$	9,450.00
B) Priority claims (Section II-A&B Total):	\$	94,445.18
C) Administrative claims (Section III-A&B Total):	\$	0.00
D) Regular unsecured claims (Section IV-D Total):+	\$	0.00
E) Separately classified unsecured claims:	\$	0.00
F) Total of $a + b + c + d + e$ above:	=\$	104,939.08
G) Divide (f) by .90 for total including Trustee's fee:		
Cost of Plan=	\$	116,598.67
(This represents the total amount to be paid into the	Chapter 13 plan)	
H. Divide (G), Cost of Plan, by Term of Plan,	<b>60</b> months	
I. Round up to nearest dollar for Monthly Plan Payment:	\$	1,944.00
(Enter this amount on page 1)		

Pursuant to 11 U.S.C. § 1326(a) (1), unless the Court orders otherwise, a debtor shall commence making the payments proposed by a plan within thirty (30) days after the petition is filed. Pursuant to 11 U.S.C. §1326(a)(1)(C), the debtor shall make preconfirmation adequate protection payments directly to the secured creditor.

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VIII. LIQUIDATION  A. Real Estate:					
Address			Fair Market Value	То	tal Amount of Recorded Liens
Of Hataala Baad		Φ.	<b>70.</b> 000 00	Φ.	(Schedule D)
-64 Uptack Road		\$	592,000.00	<b>\$</b> _	757,476.00
Total Net Equity for Re	al Property:	\$	0.00		
Less Exemptions (Scheo		\$	0.00		
Available Chapter 7:		\$	0.00		
B. Automobile (Describ	e year, make and	d model):			
-NONE-		Value \$	Lien \$		Exemption \$
Total Net Equity:		\$ 0.00			
Less Exemptions (Scheo	dule C):	\$ 0.00			
Available Chapter 7:		\$ <u>0.00</u>			
C. All other Assets (All	remaining items	on Schedule B): (Item	ize as necessary)		
Total Net Value:		\$ 36,581.00			
Less Exemptions (Scheo	dule C):	\$ 29,587.00			
Available Chapter 7:		\$ <u>6,994.00</u>			
D. Summary of Liquida	tion Analysis (to	tal amount available und	ler Chapter 7):		
Net Equity (A and B) pl	us Other Assets	(C) less all claimed exer	mptions: \$		6,994.00
E. Additional Comment	s regarding Liqu	idation Analysis:			
IX. SIGNATURES					
		tor or his or her attorney of file a Certificate of Ser-		copy of	the Plan upon the Chapter 13 Trustee
/s/ Richard D. Smeloff			April 24, 2014		
Richard D. Smeloff 56	7869ATY		Date		
Debtor's Attorney Attorney's Address: <b>45</b>	Willard Street.	Suite 200			
	incy, MA 02169				
	<u> </u>	617-773-1900 Fax:617-7	73-1966		
Er	nail Address:				
		ALTIES OF PERJURY E BEST OF OUR KNO			REPRESENTATIONS OF FACT
Date April 24, 2014		Signature	/s/ Santo T Freni		
<u> </u>			Santo T Freni		
			Debtor		